

09804978

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO.	FILING DATE
							APPLICANT(S)	
10-12-06 CLAIMS							09804978	
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			
	IND.	DEP.	IND.	DEP.	IND.	DEP.		
1	/		/		/		51	
2							52	
3							53	
4							54	
5							55	
6							56	
7							57	
8							58	
9							59	
10	/		/		/		60	
11							61	
12	/		/		/		62	
13	/		/		/		63	
14							64	
15	/		/		/		65	
16							66	
17							67	
18							68	
19							69	
20							70	
21							71	
22	/		/		/		72	
23							73	
24							74	
25							75	
26							76	
27							77	
28							78	
29							79	
30							80	
31							81	
32	/		/		/		82	
33							83	
34							84	
35							85	
36	/		/		/		86	
37	/		/		/		87	
38							88	
39							89	
40							90	
41							91	
42							92	
43							93	
44							94	
45							95	
46							96	
47							97	
48							98	
49							99	
50							100	
TOTAL IND.	8		8		8		TOTAL IND.	
TOTAL DEP.	29		29		29		TOTAL DEP.	
TOTAL CLAIMS	37		37		37		TOTAL CLAIMS	

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

BEST AVAILABLE COPY